PTO/SB/06 (08-03)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								less it displays a valid OMB control number. Application or Pocket Number		
CLAIMS AS FILED – PART I (Column 1) (Column 2) SMAI							ENTITY	OR		R THAN ENTITY
_	FOR NUMBER FILED NUMBER EXTRA				RATE	FEE		RATE	FEE	
BASIC FEE (37 CFR 1.16(a))						\$_	OR	TWATE		
TOTAL CLAIMS (37 CFR 1.16(c)) (37 CFR 1.16(c))					x \$ =		1		<u> </u>	
INI	INDEPENDENT CLAIMS				× \$=	 	OR	× \$=	 	
	(37 CFR 1.16(b)) mtrius 3 =					X \$=	 	OR	x \$=	ļ
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+ \$=		OR	+ \$=	
* If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL		OR	TOTAL	
	CLAIMS AS AMENDED – PART II (Column 2) (Column 3)						ENTITY	OR		R THAN ENTITY
AMENDMENT A	. /	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	*PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI TIOMAL FEE
Ž	Total (37 CFR 1.16(c))	29	Minus	"29	=	_ x \$ =		OR	x s=	/
	Independent (37 CFR 1.16(b))	1.0	Minus	1.0				1		
AM	FIRST ODECEN	TATION OF MUTUR	C DEDENIE	7		<u>^ </u>		OR	× \$	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$=		OR	+\$_=	
	•					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	(Column 1) (Column 2) (Column 3)									
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT. EXTRA	RATE	ADDI- TIONÁL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minus	**	=	x \$ =		OR	X \$_ =	
EN	Independent (37 CFR 1.16(b))	•	Minus	***	=	× \$ =				
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+\$ =		OR OR	X \$=	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)				•	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ş	Total (37 CFR 1.16(c))	•	Minus	**	=	x \$ =		OB	x \$ =	
Z	Independent (37 CFR 1.16(b))	•	Minus	***	=			OR		
ξ		ATION OF MULTIPLE	DEBENDE	INT CLAIM (27 CT)	2.1.16(4))	× \$=		OR	× \$=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ \$ = TOTAL		OR	+ \$= TOTAL	
•	If the "Highest N	olumn 1 is less than Jumber Previously Jumber Previously	Paid For	IN THIS SPACE I	e lace than 20 a	ntor "20"		OR	ADD'L FEE	

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.